Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

#### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Sp	oouse Only in a Joint Case):	
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's	Marisa First name A.	First name		
	license or passport).	Middle name	Middle name		
Bring your picture identification to your meeting with the trustee.		Martin Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years				
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0394			

Del	otor 1 Marisa A. Martin		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	247 Brookside Ave.	If Debtor 2 lives at a different address:			
		Roosevelt, NY 11575  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
	Nassau					
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Det	otor 1 Marisa A. Martin					Case number (if known)		
Par	t 2: Tell the Court About	our Bank	ruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chapt	ter 7					
		☐ Chapt	ter 11					
		☐ Chapt	ter 12					
		☐ Chapt	ter 13					
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
					<b>Illments.</b> If you choose this optic (Official Form 103A).	on, sign and attach the Application for II	ndividuals to Pay	
		☐ I re but app	equest that is not reco	at my fee be waiv quired to, waive your family size and	ved (You may request this option our fee, and may do so only if yo I you are unable to pay the fee in	n only if you are filing for Chapter 7. By our income is less than 150% of the offic n installments). If you choose this optior cial Form 103B) and file it with your peti	cial poverty line that n, you must fill out	
		410	пропосы		iaptor / r imig / ee vraivea (eme	nai i omi 1002) ana mo ii mar you pou		
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
	residence:	☐ Yes.	Has yo	our landlord obtai	ned an eviction judgment agains	t you?		
				No. Go to line 12	2.			
				Yes. Fill out <i>Initi</i> this bankruptcy		Judgment Against You (Form 101A) and	d file it as part of	

Deb	tor 1 Marisa A. Martin				Case number (if known)			
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Propriet	tor			
12.	Are you a sole proprietor of any full- or part-time	■ No.	Go to	Part 4.				
	business?	☐ Yes.	Name and location of business					
	A sole proprietorship is a	<b>—</b> 100.						
				Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code					
	it to this petition.		Chec	k the appropriate bo	x to describe your business:			
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	rou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set apadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, state erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the I1 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	· Hazardo	ous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat	□ Yes.						
	of imminent and identifiable hazard to	□ res.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?  Where is the property?			s the property?				
	<u> </u>				Number, Street, City, State & Zip Code			

Debtor 1 Marisa A. Martin Case number (if known)

\_\_\_\_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Marisa A. Martin			Case number (	if known)					
Par	t 6: Answer These Quest	ions for Repo	rting Purposes							
	What kind of debts do you have?	16a. <b>A</b> r			d in 11 U.S.C. § 101(8) as "incurred by an					
			□ No. Go to line 16b.							
			Yes. Go to line 17.							
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			No. Go to line 16c.							
			Yes. Go to line 17.							
		16c. Sta	ate the type of debts you owe th	at are not consumer debts or business of	debts					
17.	Are you filing under Chapter 7?	□ No. Ia	m not filing under Chapter 7. Go	o to line 18.						
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?							
	administrative expenses are paid that funds will		No							
	be available for		Yes							
	distribution to unsecured creditors?									
18.	How many Creditors do you estimate that you owe?	<b>■</b> 1-49		□ 1,000-5,000	□ 25,001-50,000					
		□ 50-99		☐ 5001-10,000	50,001-100,000					
	□ 100-199 □ 200-999			☐ 10,001-25,000 ☐ More than100,000						
19.	How much do you	□ \$0 - \$50,0	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion					
	estimate your assets to be worth?	\$50,001 -		□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion					
		□ \$100,001 ■ \$500,001		□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion					
		_ ψ500,001	- wr minori							
20.	How much do you estimate your liabilities	□ \$0 - \$50,0		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion					
	to be?	□ \$50,001 ■ \$100,001		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion					
		□ \$500,001		□ \$100,000,001 - \$500 million	☐ More than \$50 billion					
Par	t 7: Sign Below									
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.								
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.								
document, I have obtained and read			ney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this , I have obtained and read the notice required by 11 U.S.C. § 342(b).							
			ef in accordance with the chapte	er of title 11, United States Code, specifi	ed in this petition.					
		bankruptcy of and 3571.	ase can result in fines up to \$25	ealing property, or obtaining money or p 50,000, or imprisonment for up to 20 year	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,					
		/s/ Marisa / Marisa A. I		Signature of Debtor 2	!					
		Signature of	Debtor 1							
		Executed on		Executed on						
			MM / DD / YYYY	MM / I	DD / YYYY					

Debtor 1 Marisa A. Martin		Case	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United for which the person is eligible. I also certify that	States Code, and have e I have delivered to the d	debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, conschedules filed with the petition is incorrect.	ertify that I have no know	ledge after an inquiry that the information in the			
	/s/ Lawrence S. Lefkowitz LL8067	Date	January 28, 2019			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Lawrence S. Lefkowitz LL8067  Printed name					
	Law Firm of Lawrence S. Lefkowitz L.L.0	<b>3</b> .				
	Firm name	<del></del>				
	575 Uniondale Ave.					
	Uniondale, NY 11553					
	Number, Street, City, State & ZIP Code					
	Contact phone <b>516-280-2472</b>	Email address	lefkowitzlaw@hotmail.com			
	LL8067 NY					
	Bar number & State		<u> </u>			

Fill in this informa	tion to identify vo	ur case:				
Debtor 1	Marisa A. Marti First Name	Middle Name	Last Name		-	
Debtor 2		Mental Management			-	
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the	EASTERN DISTRICT OF	NEW YORK			
Case number						
(if known)						if this is an
					ameno	ded filing
Official Form	106D					
		s Who Have Clair	me Sacurac	hy Propert	N/	12/15
Scriedule D	. Creditors	s willo Have Clair	iis secured	a by Propert	<u>y</u>	12/15
		If two married people are filing out, number the entries, and at				
1. Do any creditors ha	ve claims secured b	y your property?				
□ No. Check th	nis box and submit	this form to the court with you	other schedules. Yo	ou have nothing else	to report on this form.	
Yes. Fill in al	Il of the information	below.				
Part 1: List All S	Secured Claims					
	nims. If a creditor has	more than one secured claim, list	the creditor separately	Column A	Column B	Column C
for each claim. If more	e than one creditor ha	s a particular claim, list the other c tical order according to the credito	reditors in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Mr. Cooper		Describe the property that se	cures the claim:	\$371,412.00	\$470,268.55	\$0.00
Creditor's Name		247 Brookside Ave. Ro	osevelt, NY			
		11575 Nassau County held jointly with husba	nd Willie			
Attn: Bankr		Martin	iid, wiiiie			
8950 Cypres	ss waters	As of the date you file, the cla	im is: Check all that			
Coppell, TX	75019	apply.  Contingent				
Number, Street, Ci	ty, State & Zip Code	☐ Unliquidated				
	_	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that				
Debtor 1 only			uch as mortgage or sec	cured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax li	en mechanic's lien)			
_	debtors and another	☐ Judgment lien from a lawsui				
☐ Check if this clair		☐ Other (including a right to of				
community debt		0 (				
	Opened					
	02/06 Last					
	Active					
Date debt was incurr	ed 10/31/13	Last 4 digits of accour	t number 3976			
Add the dollar valu	e of your entries in (	Column A on this page. Write the	at number here:	\$371,4°	12.00	
	•	the dollar value totals from all				
Write that number I	here:			\$371,4	12.00	
Part 2: List Other	s to Be Notified fo	or a Debt That You Already I	isted			
trying to collect from than one creditor for	you for a debt you any of the debts that	be notified about your bankrupt owe to someone else, list the cr at you listed in Part 1, list the ad	editor in Part 1, and th	nen list the collection a	gency here. Similarly, if	you have more
debts in Part 1, do no	or an out or submit t	ınə hade.				
	, Street, City, State &	Zip Code	On whic	ch line in Part 1 did you e	nter the creditor? 2.1	
Gross Polo	• •			•		
1775 Wehrl Suite 100	e Dr.		Last 4 c	ligits of account number		
	le, NY 14221					

Official Form 106D

Debtor 1	otor 1 Marisa A. Martin			Case number (if known)	
	First Name	Middle Name	Last Name		

Fill in this in	nformation to identify your	case:						
Debtor 1	Marisa A. Martin							
	First Name	Middle Name		Last Name				
Debtor 2 (Spouse if, filing)	) First Name	Middle Name		Last Name				
United State	es Bankruptcy Court for the:	EASTERN DISTRI	CT OF NEV	V YORK				
Case numbe	er							heck if this is an nended filing
	orm 106E/F e E/F: Creditors W	ho Have Uns	ecured	Claims				12/15
any executory Schedule G: E Schedule D: C left. Attach the name and cas	te and accurate as possible. Us contracts or unexpired leases executory Contracts and Unexported to the Who Have Claims Sected Continuation Page to this page number (if known).	that could result in a dired Leases (Official Fured by Property. If mo	claim. Also l orm 106G). I ore space is	list executory on Do not include needed, copy t	contracts on Sc any creditors w the Part you ne	hedule A/B: Provith partially se ed, fill it out, nu	operty (Officia cured claims imber the ent	al Form 106A/B) and on that are listed in ries in the boxes on the
1. Do any c	reditors have priority unsecure	d claims against you?						
No. G	o to Part 2.							
☐ Yes.								
Part 2:	ist All of Your NONPRIORIT	Y Unsecured Claim	s					
□ No. Yo ■ Yes.	reditors have nonpriority unsection have nothing to report in this part of the priority unsecured classifications.	art. Submit this form to	the court with			aim. If a creditor	has more than	n one nonpriority
	d claim, list the creditor separately creditor holds a particular claim, li							
								Total claim
	i Inc.	Last 4	digits of acc	ount number	4602			\$404.13
131	oriority Creditor's Name  0 MartinLuthe King Dr.  Box 3427	When	was the deb	t incurred?	2012			
Blo Num	omington, IL 61702-3427 ber Street City State Zlp Code incurred the debt? Check one.		he date you	file, the claim i	is: Check all tha	t apply		
<b>■</b> D	Pebtor 1 only	☐ Cor	ntingent					
	Debtor 2 only		iquidated					
	Debtor 1 and Debtor 2 only	☐ Dis	-					
	at least one of the debtors and and	_		RITY unsecured	d claim:			
Пα	Check if this claim is for a comr	nunity 🔲 Stu	dent loans					
debt		□ОЫ	ligations arisi as priority cla		ration agreemer	nt or divorce that	you did not	
■ N	lo	☐ Del	ots to pensior	n or profit-sharin	g plans, and oth	er similar debts		
□Y	′es	Oth	ner. Specify	collection f	or Verizon t	elephone bi	II	

Debtor	1 Marisa A. Martin	Case number (if known)				
4.2	AmericanStudentAssistance	Last 4 digits of account number	0394	\$1,301.44		
	Nonpriority Creditor's Name 33 Arch St.	When was the debt incurred?	2013 approx.			
	Ste. 2100					
	Boston, MA 02110-1442		tra Ol - I - II II - I - I			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	IS: Check all that apply			
	_	По и				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed	Lateta			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts			
	☐ Yes	Other Specify student loa				
4.3	Avon Products	l and d dissite of account mumber	0720	\$163.39		
4.5	Nonpriority Creditor's Name	Last 4 digits of account number		<b>\$103.39</b>		
	One Liberty Plaza	When was the debt incurred?	2015			
	165 Broadway					
	New York, NY 10006  Number Street City State Zlp Code	As of the date you file, the claim				
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneck all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	_ `				
		☐ Disputed  Type of NONPRIORITY unsecuree				
	At least one of the debtors and another	☐ Student loans				
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify personal p	roducts			
4.4	Capital One	Last 4 digits of account number	9691	\$2,150.46		
	Nonpriority Creditor's Name	_		· · ·		
	Attn: Bankruptcy PO Box 30285	When was the debt incurred?	Opened 06/17 Last Active 1/03/19			
	Salt Lake City, UT 84130	when was the dept incurred?	1/03/19			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	l				

Debtor	Marisa A. Martin	Case number (if known)					
4.5	Capital One	Last 4 digits of account number	7083	\$745.00			
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/16 Last Active 12/27/18				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.6	Merrick Bank/CardWorks Nonpriority Creditor's Name	Last 4 digits of account number	8538	\$343.00			
	Attn: Bankruptcy PO Box 9201	When was the debt incurred?	Opened 12/18 Last Active 1/15/19				
	Old Bethpage, NY 11804  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit Card	<u> </u>				
4.7	National Grid Nonpriority Creditor's Name	Last 4 digits of account number	4006	\$263.83			
	2400 Sunrise Hwy. Bellmore, NY 11710	When was the debt incurred?	2018-2018				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other Specify utility bill					

Debto	or 1 Marisa A. Martin	Case number (if known)				
4.8	PSEGLI	Last 4 digits of account number 1354	\$1,333.66			
	Nonpriority Creditor's Name 333 Earle Ovington Blvd. Uniondale, NY 11553	When was the debt incurred? 2017-2018				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify utility bill	_			
4.9	Quest Diagnostics Nonpriority Creditor's Name	Last 4 digits of account number 0394	\$395.55			
	500 Plaza Dr.	When was the debt incurred? 2016	_			
	Secaucus, NJ 07094  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	Other. Specify medical bill	_			
4.1	Rodale Inc.	Last 4 digits of account number 8149	\$100.60			
0	Nonpriority Creditor's Name	Last 4 digits of account fidings:				
	733 Third Avenue 15th Floor	When was the debt incurred? 2013	_			
	New York, NY 10017-3204					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only					
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	■ Other. Specify reading material				
	- <del>-</del>	— Outlot, Opeolity				

Debtor 1 Marisa A. Martin				Case number (if known)					
4.1	Synchr	ony I	Bank/	Last 4 digits of account number	8431		\$1,218.00		
	-	y Cred	itor's Name			ed 07/18 Last Active	<del></del>		
	Attn: B	ankr 965		When was the debt incurred?	1/02/1				
	Orlando Number S		32896 City State Zlp Code	As of the date you file, the claim	is: Check	all that apply			
			he debt? Check one.	• • • • • • • • • • • • • • • • • • • •					
	■ Debtor	1 only	/	☐ Contingent					
	☐ Debtor	2 only	/	☐ Unliquidated					
	☐ Debtor	1 and	Debtor 2 only	☐ Disputed					
	☐ At leas	t one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
	☐ Check	if this	s claim is for a community	☐ Student loans					
	debt Is the clai	im sub	eject to offset?	Obligations arising out of a sep report as priority claims	aration ag	reement or divorce that you did not			
	■ No			Debts to pension or profit-shari	ng plans, a	and other similar debts			
	☐ Yes			■ Other. Specify Charge Ac	count				
Down 0	<b>-</b> 1 :- 1 0	41	to De Notifical Alexande D	Let The d Very Almer deal Sector					
Part 3:				ebt That You Already Listed about your bankruptcy, for a debt that	vou alrea	dy listed in Parts 1 or 2. For example	if a collection agency		
is tryin have m	ng to colle nore than	ct fror	n you for a debt you owe to s	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1	or 2, then list the collection agency h	ere. Similarly, if you		
	nd Address		•	On which entry in Part 1 or Part 2 did you list the original creditor?					
	Intersta		-			Creditors with Priority Unsecured Claims			
3000 CorporateExchangeDr. Columbus, OH 43231-7689				■ Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number					
Name and Address				On which entry in Part 1 or Part 2 did yo		•			
CCS 725 Ca	anton St					Creditors with Priority Unsecured Claims			
	od, MA		2	Last 4 digits of account number	■ Part 2: 0	Creditors with Nonpriority Unsecured Cla	aims		
Name an	nd Address			On which entry in Part 1 or Part 2 did yo	u list the or	riginal creditor?			
Penn C		4		Line 4.10 of (Check one):					
РО Во				■ Part 2: Creditors with Nonpriority Unsecured Claims					
Harrisl	burg, P	<b>A</b> 171	08-0988	Last 4 digits of account number					
Name an	nd Address			On which entry in Part 1 or Part 2 did yo	u list the or	riginal creditor?			
Sunris	e Credit	Srv			_	Creditors with Priority Unsecured Claims			
	rport Pla				Part 2: 0	Creditors with Nonpriority Unsecured Cla	aims		
Farmir	ngdale, l	NY 1	1/35	Last 4 digits of account number					
Dort 4.	• A al al 41		equate for Each Type of I	Incomunad Claim					
Part 4:			nounts for Each Type of U						
	ne amoun f unsecure			aims. This information is for statistical	reporting	purposes only. 28 U.S.C. §159. Add to	ne amounts for each		
		_			_	Total Claim			
	otal	6a.	Domestic support obligation	ns	6a.	\$0.00			
cla from Pa	aims art 1	6b.	Taxes and certain other deb	ts you owe the government	6b.	\$ 0.00			
		6c.		I injury while you were intoxicated	6c.	\$ 0.00			
		6d.	Other. Add all other priority ur	secured claims. Write that amount here.	6d.	\$ 0.00			
		6e.	Total Priority. Add lines 6a th	rouah 6d.	6e.	\$ 0.00			
					-0.	<b>U.00</b>			

Total Claim

Debtor 1 Marisa A. Martin			Case number (if known)		
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	8,419.06
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	8,419.06

Fill in this infor	rmation to identify your	case:			
Debtor 1	Marisa A. Martin				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case number					
(if known)					Check if this is an
					amended filing

### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Kia Motors Finance PO Box 20825 Fountain Valley, CA 92728 lease on 2018 Kia Optima

Fill in this	s information to identify your	case:			
Debtor 1	Marisa A. Martin				
<b>D</b> 14 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT OF	F NEW YORK		
Case nun (if known)	nber				☐ Check if this is an amended filing
	al Form 106H <mark>dule H: Your Cod</mark>	ebtors			12/15
people are fill it out, a your name	e filing together, both are equ	ally responsible for supp boxes on the left. Attach . Answer every question.	lying correct information the Additional Page to	on. If more space is no this page. On the top	nte as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
□ No ■ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana,				states and territories include
`	. Go to line 3. s. Did your spouse, former spou	use, or legal equivalent live	with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guarant	tor or cosigner. Make su	ure you have listed th	g with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1	Willie Martin 605 Louisiana Ave. Apt. 7E Brooklyn, NY 11239			■ Schedule D, lin □ Schedule E/F, □ Schedule G Mr. Cooper	line

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Fill in this inform	ation to identify your	case:				
Debtor 1	Marisa A. Martin					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the:	EASTERN DISTR	ICT OF NEW YORK			
Case number						
(if known)					_	eck if this is an ended filing
Official For	m 108					
<u>Statemen</u>	t of Intentio	n for Indiv	iduals Filing	g Under Chapte	er 7	12/15
If you are an indiv	idual filing under cha	pter 7. vou must fill	out this form if:			
	claims secured by yo					
You must file this	er is earlier, unless th	ithin 30 days after	you file your bankrupto	cy petition or by the date se nust also send copies to the		
	pple are filing together I date the form.	r in a joint case, bo	th are equally responsi	ible for supplying correct in	nformation. Bo	th debtors must
	nd accurate as possib ur name and case nur		needed, attach a sepa	rate sheet to this form. On	the top of any	additional pages,
Part 1: List You	ur Creditors Who Have	e Secured Claims				
1. For any creditor	rs that you listed in Pa	art 1 of Schedule D	: Creditors Who Have C	Claims Secured by Property	/ (Official Form	າ 106D), fill in the
Identify the cred	ow. ditor and the property t	hat is collateral	What do you intend t	to do with the property that		claim the property
			secures a debt?		as exem	pt on Schedule C?
Creditor's Mr	. Cooper		☐ Surrender the prop	orty	<b>=</b>	
name:	. осорсі		Retain the property	•	■ No	
Description of	247 Brookside Ave	e. Roosevelt,	Retain the property  Reaffirmation Agre		☐ Yes	
property	NY 11575 Nassau held jointly with hi		☐ Retain the property			
securing debt:	Martin				_	
	ur Unexpired Persona					
in the information	below. Do not list rea	il estate leases. Un	expired leases are leas	ory Contracts and Unexpire ses that are still in effect; th sume it. 11 U.S.C. § 365(p)(	e lease period	
Describe your un	expired personal pro	perty leases			Will the lease	e be assumed?
Lessor's name:	Kia Motors Fir	nance			□ No	
					Yes	
Description of leas Property:	ed lease on 2018	Kia Optima				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Marisa A. Martin		Case number (if known)
Par	3: Sign Below	
		on about any property of my estate that secures a debt and any personal
prop X	erty that is subject to an unexpired lease.  /s/ Marisa A. Martin	v
^	Marisa A. Martin Signature of Debtor 1	Signature of Debtor 2
	Date <b>January 28, 2019</b>	Date

# **United States Bankruptcy Court Eastern District of New York**

In re	Marisa A. Martin			
		Debtor(s)	Chapter	7

#### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: January 28, 2019

/s/ Marisa A. Martin

Signature of Debtor

Date: January 28, 2019

/s/ Lawrence S. Lefkowitz LL8067

Signature of Attorney
Lawrence S. Lefkowitz LL8067

Lawrence S. Lerkowitz LL8067 Law Firm of Lawrence S. Lefkowitz L.L.C. 575 Uniondale Ave. Uniondale, NY 11553 516-280-2472 Fax: 516-280-2473

USBC-44 Rev. 9/17/98

Afni Inc. 1310 MartinLuthe King Dr. PO Box 3427 Bloomington, IL 61702-3427

Allied Interstate LLC 3000 CorporateExchangeDr. Columbus, OH 43231-7689

AmericanStudentAssistance 33 Arch St. Ste. 2100 Boston, MA 02110-1442

Avon Products One Liberty Plaza 165 Broadway New York, NY 10006

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

CCS
725 Canton St.
Norwood, MA 02062

Gross Polowy, LLC 1775 Wehrle Dr. Suite 100 Williamsville, NY 14221

Kia Motors Finance PO Box 20825 Fountain Valley, CA 92728

Merrick Bank/CardWorks Attn: Bankruptcy PO Box 9201 Old Bethpage, NY 11804

Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019 National Grid 2400 Sunrise Hwy. Bellmore, NY 11710

Penn Credit 916 S. 14th Street PO Box 988 Harrisburg, PA 17108-0988

PSEGLI 333 Earle Ovington Blvd. Uniondale, NY 11553

Quest Diagnostics 500 Plaza Dr. Secaucus, NJ 07094

Rodale Inc. 733 Third Avenue 15th Floor New York, NY 10017-3204

Sunrise Credit Srvcs.Inc. 260 Airport Plaza Blvd. Farmingdale, NY 11735

Synchrony Bank/ Care Credit Attn: Bankruptcy Dept. PO Box 965061 Orlando, FL 32896

Willie Martin 605 Louisiana Ave. Apt. 7E Brooklyn, NY 11239